

CAMPAIGN FINANCE REPORT  
STATE OF WISCONSINMILWAUKEE COUNTY  
ELECTION COMMISSION

2011 FEB -7 P 1:27

RECEIVED  
OFFICE USE ONLYIs This Report an Amendment: ☐ Yes ☒ No

Instructions for completing schedules are on the back of each schedule.

## COMMITTEE IDENTIFICATION

Name of Committee

The Poor People's Piece of the Pie Campaign Committee

Street Address

2722A N. Richards St.

City, State and Zip Code

Milwaukee, WI. 53212

WSEB ID Number:

Please check if address is different than previously reported, and complete the Campaign Registration Statement in the back of this form. ☐

## NAME OF REPORT

☐ January Continuing ☒ Pre-Primary ☒ Spring ☐ Fall ☐ Special  
☐ July Continuing ☐ Pre-Election ☐ Spring ☐ Fall ☐ Special
☐ Termination Report  
also complete Schedule 4SUMMARY OF RECEIPTS AND  
DISBURSEMENTSColumn A  
This PeriodColumn B  
Calendar  
Year-To-DateAudited Totals  
Office Use Only

## 1. RECEIPTS

1A. Contributions (Including Loans) from Individuals

\$ 0

\$ 0

\$

\$

1B. Contributions from Committees (Transfers-In)

\$ 0

\$ 0

\$

\$

1C. Other Income and Commercial Loans

\$ 0

\$ 0

\$

\$

TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)

\$ 0

\$ 0

\$

\$

## 2. DISBURSEMENTS

2A. Gross Expenditures

\$ 0

\$ 0

\$

\$

2B. Contributions to Committees (Transfers-Out)

\$ 0

\$ 0

\$

\$

TOTAL DISBURSEMENTS (Add totals from 2A and 2B)

\$ 0

\$ 0

\$

\$

## CASH SUMMARY

Cash Balance Beginning of Report

\$ 0

\$

Total Receipts

\$ 0

\$

Subtotal

\$ 0

\$

Total Disbursements

\$ 0

\$

CASH BALANCE END OF REPORT

\$ 0

\$

INCURRED OBLIGATIONS

\$ 0

\$

(Balance at the Close of This Period-3A)

\$

\$

LOANS (Balance at the Close of This Period-3B)

\$ 0

\$

I certify that I have examined this report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Candidate or Treasurer

Ieshuh Griffin

Signature of Candidate or Treasurer

Date:

2/5/11

Daytime Phone:

334-0039

The information on this form is required by ss.11.06, 11.20, Wis. Stats. Failure to provide the information may subject you to the penalties of ss.11.60, 11.61, Wis. Stats.

This form is prescribed by the State Elections Board P.O. Box 2973, Madison, WI 53701-2973, 608-266-8005 Fax:608-267-0500

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Website: elections.state.wi.us e-mail: seb@seb.state.wi.us